U S Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215-0188 Expires 11 30 2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

E (OME NE)			
1 File Number U 8677	2 Fiscal Year Covered From		
	1 / 1 / 2004 Through [2 / 3] / 2004		
3 Name and address of person filing	4 Name file number and address of labor organization		
Name LESTER D HOLLINGSWORTH	Name LABORERS LOCAL 660		
hand hand hand	Labor Organization File Number 016-801		
DO DO OLL DOWN AND A STATE OF THE STATE OF T			
PO Box Bidg Room No If any	P O Box Building and Room Number if any		
Street 1719 SUMMERGATE COURT	Street 601 SOUTH FOURTH STREET		
City SAINT CHARLES	City SAINT CHARLES		
Stafe MISSOURI ZIP Code +4 63303	State MISSOURI ZIP Code + 4 63301-3424		
5 Position in labor organization	- [LOGOMI DJJMT-J923		
EXECUTIVE BOARD	<u></u>		
12 ב ז רוב אונגריי ברו יישור ברו היישור ברו היישור ברו ברו היישור ברו היישור ברו ברו ברו ברו ברו ברו ברו ברו ברו ב			
A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent			
6, Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or income -		
Name			
Trade Name if any			
PO Box Bldg Room No If any			
Street	7 b Amount.		
NI-2	p		
5. Ciprime and and els of Employer inclusion addition ()	7.5 Natur. of Lette Transacti Torlo 2.16		
-State 11 215 U190 1 ZIP Code + 4	15 - 15 at 3 CEN 3 U C PIT		
Flut 1 7,8 F H 7 H 7 Signature F 7 H3 F			
15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)			
21 signed Leste Holling worth	on 08/11/2005 636-946-8766		
0	Date Telephone Number		

Form LM-30 (2003)

Name of Person Filing LESTER D HOLLINGSWORTH	File Number U		
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested			
8 Name and address of Business (including trade name if any) Name LABORERS-AGC TRAINING CENTER Trade Name if any P O Box Bidg Room No if any Street 35 OPPORTUNITY ROAD City HIGH HILL State MISSOURI ZIP Code + 4 63350	9 Business deals with X a Labor Organization b Trust c Employer		
10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name if any P O Box Bldg Room No if any	PROVIDES TRAINING FOR LOCAL 6 AND JOURNEYMAN MEMBERS	660 APPRENTICE A	
Street City State ZIP Code + 4	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received 3-18-04 RECEIVED A MEAL AND R THE APPRENTICESHIP BANQUET \$33 59	EFRESHMENTS AT THE VALUE WAS	
	12 b Amount	\$34	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value			
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment		
Trade Name if any		er e	
P O Box Bldg Room No if any Street City State ZiP Code + 4			
13 b is the Business an Employer or Consultant ?	14 b Amount of payment		